## PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2001

**Application or Docket Number** 

10005249

		CLAIMS AS	l		SM	SMALL ENTITY			OTHER	THAN		
			(Column 1)		(Column 2)			TYPE		OR	SMALL	
TOTAL CLAIMS			20				F	RATE	FEE		RATE	FEE
FOR			NUMBER FILED		NUMBER EXTRA		ВА	SIC FEE	370.00	OR	BASIC FEE	740.00
TOTAL CHARGEABLE CLAIMS			20 minus 20=		* Ø		,	X\$ 9=		OR	X\$18=	
INDEPENDENT CLAIMS			3 minus 3 =		* Ø			X42=		OR	X84=	
MULTIPLE DEPENDENT CLAIM PRESENT							+	140=		OR	+280=	
* If the difference in column 1 is less than zero, en					nter "0" in column 2			OTAL		OR	TOTAL	
	С	LAIMS AS A	MENDED	- PAR	T II					•	OTHER	THAN
		(Column 1)		(Colu		(Column 3) SMALL			ENTITY	OR .	SMALL	ENTITY
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT	,	HIGH NUM PREVIO PAID	BER DUSLY	PRESENT EXTRA	F	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=	<b>\</b>	K\$ 9=		OR	X\$18=	
AME	Independent	*	Minus ***		CL AIM	=	>	X42=		OR	X84=	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM								140=.		OR	+280=	
							AD:	TOTAL		OR	TOTAL ADDIT. FEE	
		ADL	DIT. FEE			AUDII. FECT	<u> </u>					
_		(Column 1) CLAIMS		(Colu	IEST	(Column 3)		1	ADDI-			ADDI-
AMENDMENT B		REMAINING AFTER AMENDMENT		NUM PREVI PAID	OUSLY	PRESENT EXTRA	F	RATE	TIONAL FEE		RATE	TIONAL FEE
	Total	*	Minus	**		=	>	<b>(</b> \$ 9=		OR	X\$18=	
	Independent	*	Minus	***	F OL 4 114	-		X42=		OR	X84=	
<u> </u>	FIRST PRESE	NTATION OF MU	JETIPLE DEP	ENDEN	CLAIM		╵┞	140=		OR	+280=	
	TOTAL									OR	TOTAL	
		ADE	OIT. FEE <b>L</b>		JON .	ADDIT. FEE						
(Column 1) (Column 2) (Column 3) CLAIMS HIGHEST												<del></del>
AMENDMENT C		REMAINING AFTER AMENDMENT		NUM PREVIO PAID	BER OUSLY	PRESENT EXTRA	F	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=	×	(\$ 9=		OR	X\$18=	
	Independent	*	Minus	***		=	<b>\</b>	(42=		OR	X84=	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT						╵├╴					
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.										OR	+280=	
**	If the "Highest Nu	mber Previously Pa mber Previously Pa	aid For" IN THIS	S SPACE i	is less tha	n 20, enter "20."	ADD	TOTAL OIT. FEE		OR ,	TOTAL ADDIT. FEE	
		nber Previously Pai					er found i	in the app	ropriate box	in col	umn 1.	